# A STUDY TO CORRELATE BETWEEN PSYCHOLOGICAL DISTRESS OF DEPRESSION, ANXIETY AND STRESS AND INSOMNIA EXPERIENCED BY NURSING OFFICERS WORKING IN COVID WARD AT BHUBANESWAR

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***ABSTRACT:***

*Long work hours and high workload, exposure to the virus, frequent and close contact with patients infected with COVID-19, the lack of personal protective equipment (PPE), stigmatization as a vector of the virus, media pressure, and increased number of deaths could lead to psychological distress and exhaustion in them. Furthermore, nonstandard PPE, excessive sweating and dehydration, wounds and the feeling of suffocation caused by wearing masks for a long time, and lack of proper conditions for eating and drinking could lead to further physical burdens in nurses during the COVID-19 pandemic. A mixed method study was conducted in selected hospitals of Bhubaneswar, Odisha, to assess the impact of Covid among200 nursing officers working in Covid wards. The questionnaire which includes demographic profile, DASS-21 and insomnia severity index were used for risk assessment like psychological distress of depression, anxiety, stress and insomnia, Interview guide used to assess the experience of nursing officers while working in the Covid Ward. Correlation between depression and insomnia indicates the positive correlation and shows the results Pearson correlation r- value is (0.230), p-value is (p=0.000) are statistically highly significant, which means as the level of depression increases there is an increase in the level of insomnia. Correlation between anxiety and insomnia indicates the positive correlation and shows the results Pearson correlation r- value is (0.234), p-value is (p=0.000) are statistically highly significant, which means as the level of anxiety increases there is an increase in the level of insomnia. The correlation between stress and insomnia indicates a positive correlation and shows the results Pearson correlation r- value is (0.232), p-value is (p=0.000) are statistically highly significant, which means as the level of stress increases there is an increase in the levelof insomnia.*

***KEYWORDS :*** *Virus, stigmatization, sweating, suffocation.*

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**INTRODUCTION**

During the outbreak of infectious diseases, health care and medical staff always play the most important role in treating patients, and thus their health is endangered or they may even lose their lives [Shu-Ching et al 2020] Also, as the largest group of health professionals, nurses work at the frontline of the healthcare system and provide direct care to patients with COVID-19 disease [Enyew Mekonen et al 2020].

The pandemic had a huge impact on healthcare workers across the globe, and as surgespeak and second waves are anticipated, it will continue to do so for the foreseeable future. Nurses appear to be at an increased risk of developing mental disorders, which may reflect longer hours at work, separation from their families, and caring for a large number of patients. Depression impairs both psychological and physical functions, which diminish professional performance, affects the quality of patient treatment outcomes, and provokes conflicts with patients, or colleagues. Therefore, depression is a critical issue; not only for nurses themselves, but also for the health and safety of the patients they treat [Sarah Crowe et al 2021].

**TITLE**

**A STUDY TO CORRELATE BETWEEN PSYCHOLOGICAL DISTRESS OF DEPRESSION, ANXIETY AND STRESS AND INSOMNIA EXPERIENCED BY NURSING OFFICERS WORKING IN COVID WARD AT BHUBANESWAR**

**OBJECTIVE**

1. **TO CORRELATE BETWEEN PSYCHOLOGICAL DISTRESS OF DEPRESSION, ANXIETY AND STRESS AND INSOMNIA EXPERIENCED BY NURSING OFFICERS WORKING IN COVID WARD REVIEW OF LITERATURE**

Leodoro J. Labrague , et al (2020),conducted the cross-sectional study to examine the relative influence of fear of COVID-19 on nurses' psychological distress, work satisfaction and intent to leave their organization and the profession, in five hospitals in the Philippines ,2020.The researcher involved 261 frontline nurses for the study and used five standardized scales for data collection i.e., fear of COVID-19 Scale, the Job Stress Scale (JSS), the Job SatisfactionIndex (JSI). The result revealed that the frontline nurses who had reported not having attended COVID-19-related training and those who held part-time job roles reported increased fears ofCOVID-19

ShashaCui , et al(2020), conducted a cross sectional survey to examine the psychological impact of COVID-19 upon 453 EFO(emergency and fever outpatient) nurses in Chinese hospitals, in mid-month of February, 2020. Convenience sampling technique was used to recruit EFO nurses from hospitals in Jiangsu Province. Data were obtained by self-administered online questionnaires, which consisted of a general questionnaire, the Self-Rating Anxiety Scale, Perceived Stress Scale-14 and Simplified Coping Style Questionnaire. The Pearson correlation showed a positive correlation of the anxiety with stress score (r=0.443, P< 0.001) and stress (r=-0.503, P< 0.001). COVID-19 has a certain psychosocial impact upon EFO nurses

**METHODOLOGY**

A mixed method study was conducted in selected hospitals of Bhubaneswar, Odisha, to assess the impact of Covid among 200 nursing officer's working in Covid wards. Questionnaire which includes demographic profile, DASS-21 and insomnia severity index were used for risk assessment like psychological distress of depression, anxiety, stress and insomnia, Interview guide used to assess experience of nursing officers while working in the Covid Ward.

**RESULTS:**

**CORRELATION BETWEEN PSYCHOLOGICAL DISTRESS OF DEPRESSION, ANXIETY AND STRESS AND INSOMNIA EXPERIENCED BY NURSING OFFICERS WORKING IN COVID WARD**

| **CORRELATION BETWEEN PSYCHOLOGICAL DISTRESS OF DEPRESSION, ANXIETY AND STRESS AND INSOMNIA EXPERIENCED BY NURSING OFFICERS WORKING IN COVID WARD** | **MEAN** | **SD** | **'r' VALUE** | **'p' VALUE** |
|---|---|---|---|---|
| **Depression** | 8.67 | 5.13 | 0.230 | **0.000** HS** |
| **Insomnia** | 14.19 | 7.77 | | |
| **Anxiety** | 9.43 | 4.97 | 0.234 | **0.000** HS** |
| **Insomnia** | 14.19 | 7.77 | | |
| **Stress** | 9.92 | 4.64 | 0.232 | **0.000** HS** |
| **Insomnia** | 14.19 | 7.77 | | |

*****-p < 0.001 highly significant***

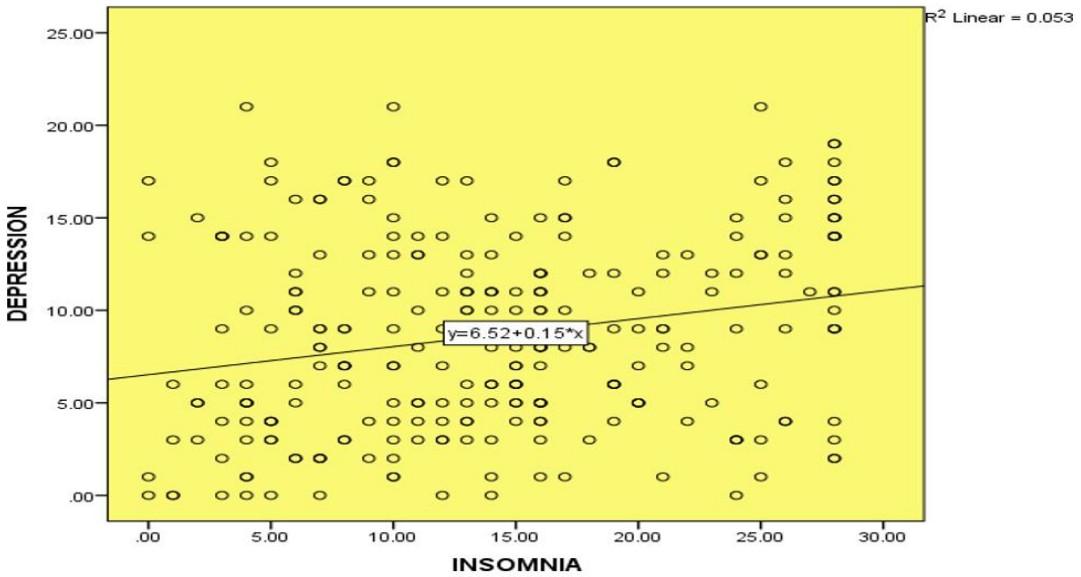


**Figure: 1 scatter diagrams shows Correlation between depression and insomnia experienced by nursing officers working in COVID ward (Positive correlation).**

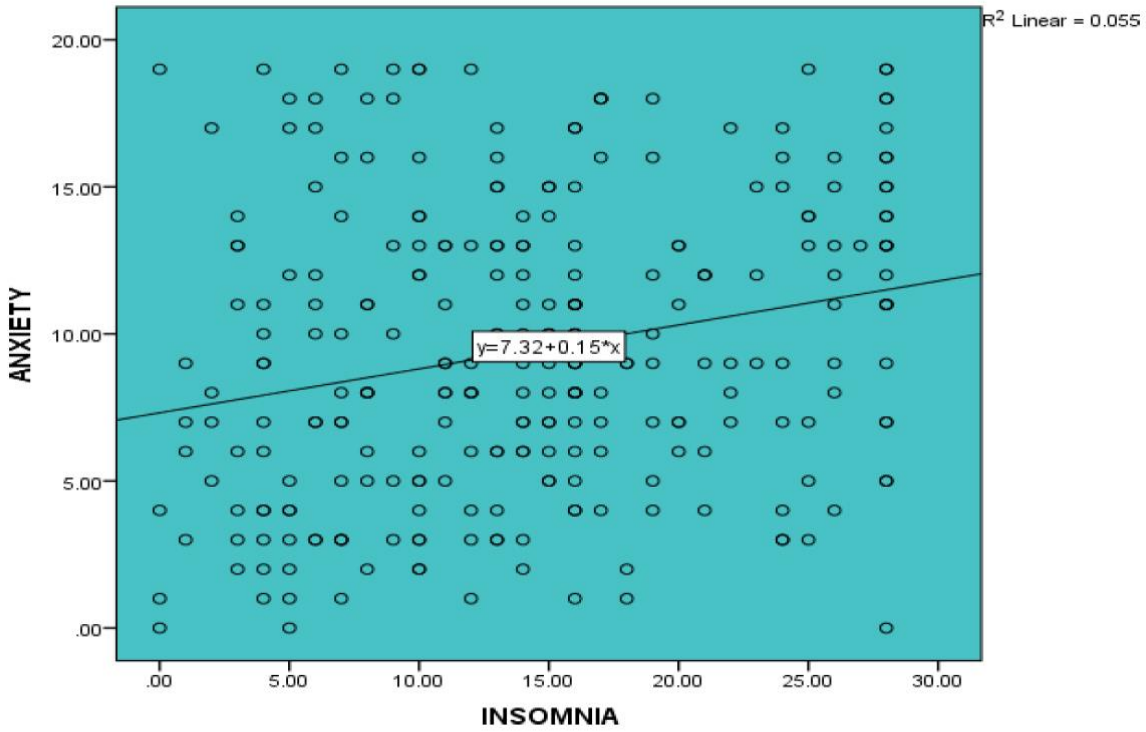


**Figure: 2 scatter diagrams shows Correlation between anxiety and insomnia experienced bynursing officers working in COVID ward (Positive correlation).**

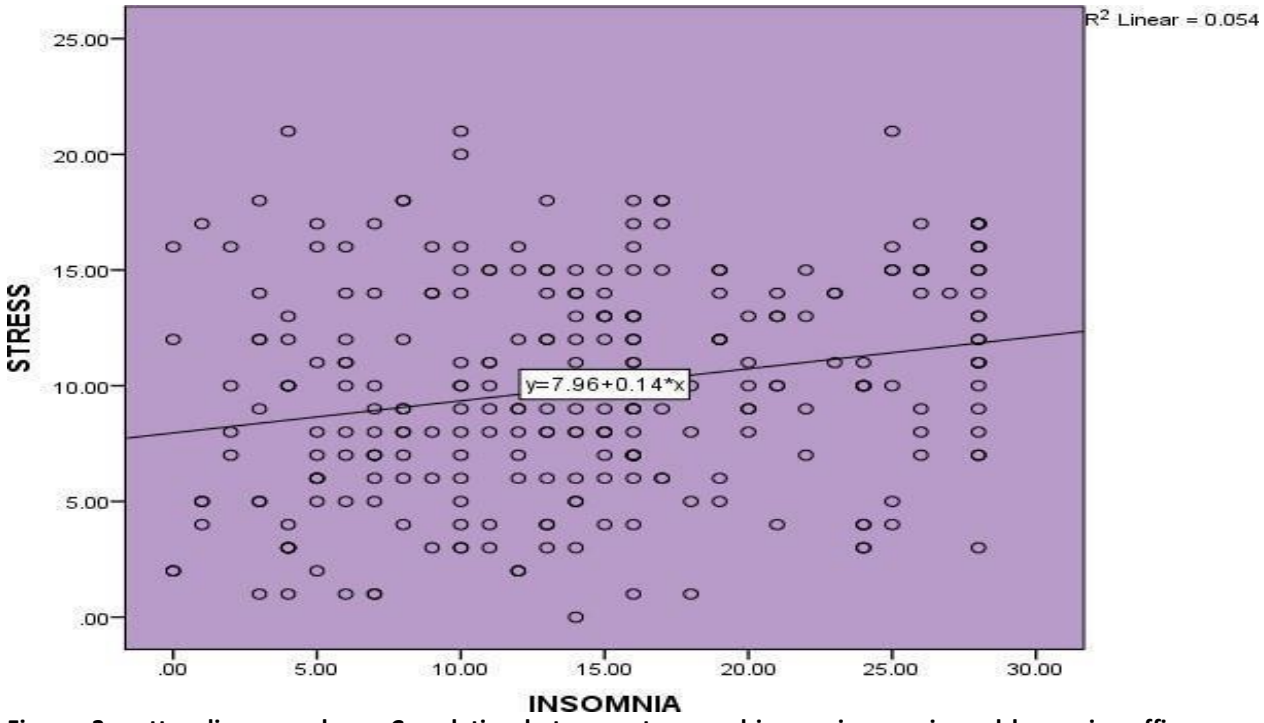


**Figure: 3 scatter diagrams shows Correlation between stress and insomnia experienced bynursing officers working in COVID ward (Positive correlation).**

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